



Division of Payment Management  
7700 Wisconsin Avenue, Suite 10104  
Bethesda, Maryland 20814

NATIONAL PARK SERVICE GRANTEES ONLY
Fed. Agreement Number

**Division of Payment Management  
Payment Management System Access Form**

**\*\*\*This form must be completed in its entirety in order to be processed\*\*\***

*Please print or type*

**Action(s) Requested: (check all that apply)**

☐ Establish New User Access

☐ Change Existing User Access: Current PMS Username \_\_\_\_\_

☐ Update Existing User Contact Information: Current PMS Username \_\_\_\_\_

☐ Deactivate User Access: Current PMS Username if not known, print or type first and last name of person to be deactivated and complete sections 1, 2 and 5 below \_\_\_\_\_

1. Name of Institution/Organization: \_\_\_\_\_

2. Payee Identification Number(s) (PIN) if not known, list EIN: \_\_\_\_\_

Is the action requested for all accounts associated with this PIN(s)? ☐ Yes ☐ No

3. Request to Establish/Change Access or Update Contact Information for:

Name (Please Print): \_\_\_\_\_

Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

4. Type of access requested for user. Please select one in each category if applicable.

**Payment Requests and Inquiries**

☐ Payment Requests and Inquiries

☐ Inquiry Only

**Federal Financial Report (FFR)**

**(B type accounts can only receive FFR View Only)**

☐ FFR View Only

5. Supervisor's Approval of requested action (recipient organization authorized representative)

**If you are the highest ranking person in your organization, please sign your own form.**

Supervisor Name (Please Print): \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_ Supervisor's Telephone Number: \_\_\_\_\_

**IF THIS IS A NEW ACCOUNT, PLEASE MAIL THIS FORM ALONG WITH YOUR SF-1199A DIRECT DEPOSIT FORM TO NATIONAL PARK SERVICE HISTORIC PRESERVATION GRANTS DIVISION, 1201 I (EYE) ST., NW (2256), 6<sup>TH</sup> FLOOR, WASHINGTON, DC 20005.**

**IF YOUR PAYMENT MANAGEMENT SYSTEM HAS ALREADY BEEN ESTABLISHED, YOU MAY FAX THIS FORM DIRECTLY TO THE DIVISION OF PAYMENT MANAGEMENT AT 301-492-4581.**